

STATE OF NEW HAMPSHIRE DEPARTMENT OF SAFETY

Richard M. Flynn, Commissioner

Division of Fire SafetyOffice of the State Fire Marshal

J. William Degnan, State Fire Marshal

Office: Richard M. Flynn Fire Academy, Route 106, Concord, N.H. Mailing Address: 33 Hazen Drive, Concord, N.H. 03305 603-271-3294, FAX 603-271-1091



NH HEATING TECHNICIANS VOLUNTARY CERTIFICATION PROGRAM AFFIDAVIT FOR PROOF OF APPROPRIATE FIELD EXPERIENCE

I attest, under penalties of perjury, that this document is a true affidavit of fact relating to the proof

NAME:_____ DATE: _____

of appropriate field experience as required under Saf-C 4900 (NH Administrative Rules).			
Signature			
Employers: By filling out and signing this affidavit, you are attesting to the appropriate field experience of the above named individual while in your employ.			
START	END	NAME OF COMPANY	TYPE OF WORK
DATE	DATE	PRINT SUPERVISOR NAME	SIGNATURE OF SUPERVISOR